RF-3

MAY 1 6 2007 ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET MAY 1 6 2007 IDFPR (MPC) DIVISION OF INSURANCE SPRINGFIELD

Change in Company's premium or rate level produced by rate revision effective May 16, 2007 NB July 16, 2007 RN

(1)	(2)	(3)
Coverage	Annual Premium	<u>Percent</u>
	Volume (Illinois)	<u>Change (+ or -)**</u>
1. Automobile Liability Private	\$41,634,575 <i>-</i> 2006	Decrease (- 2.7%)
Passenger Gommercial		
2. Automobile Physical Damage	\$22,562,028 - 2006	Decrease (- 2.3%)
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners	-	
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing establishes new territories: 1-11, 14, 49 and 51-56. The rates for Physical Damage remain mostly unchanged. However, due to the territory realignment a few Physical Damage rates in each new territory were changed to reflect the relative change in loss experience. The rates for individual classes were evaluated individually and then raised, lowered or left alone based on the specific pricing policies of American Access. Additionally American Access has changed its surcharge for International/Mexican Licenses and for Missing/Unverifiable Licenses to 10%.

Brief description of filing (If filing follows rates of an advisory organization, specify organization):

The rates for Physical Damage remain mostly unchanged. The changes in Liability are based territory on reductions in loss ratios in driver classes and changes in earned premium.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Access Casualty Company
Name of Company

John Finucane - Pricing Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	<u>-0.07%</u> /-/-0/
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger	\$474,823	5.00%
Automobile Physical Damage Private Passenger Lightlift Other Then Automotive	\$407,324	-6.17%
 Liability Other Than Auto Burglary and Theft Glass 		
6. Fidelity 7. Surety		
Boiler and Machinery Fire		
10. Extended Coverage11. Inland Marine		
12. Homeowners13. Commercial Multi-Peril		
14. Crop Hail 15. Other Line of Insurance		
	(territories) or certain classes? If so, specify:	
Brief description of filing. (If filing follows	rates of an advisory organization, specify orga	nization): Statewide base rate
change: Statewide changes: BI, PD, CSI	_, Med-Pay, and UM/UIM OTC; Net Effect -0.0	<i>1</i> 70
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rates.	
		ati Indemnity Company me of Company
		Personal Lines Analyst

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	-0.07% /-1-0'/
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger	\$13,589,021	5.00%
Automobile Physical Damage		
Private Passenger	\$11,298,146	-6 <u>,17%</u>
3. Liability Other Than Auto		-
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
	(territories) or certain classes? If so, specify: N	
Statewide changes: BI, PD, CSL, Med-P	rates of an advisory organization, specify orga ay, and UM/UIM OTC; Net Effect -0.07%	inization): <u>Statewide base rate change</u>
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rates. Cincinnati	Insurance Compay me of Company

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2007

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Private Passenger	\$5,550,721	3%
_	Commercial		
2.	Automobile Physical Damage		204
	Private Passenger Commercial	\$3,070,572	<u>3%</u>
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	-	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners	·-	
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	es filing only apply to certain territory	(territories) or certain classes? If so, specify:	N/A
Brie cove		rates of an advisory organization, specify orga	nization): Base rates change by
	justed to reflect all prior rate change hange in Company's premium level v	s. which will result from application of new rates.	



Citizens Insurance Company of Illinois				
Name of Company				
Susan M. Whitworth				
	Official – Title			

Change in Company's premium or rate level produced by rate Revision effective <u>09/01/07</u>

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability	077 100	0.440/
	Private Passenger	\$77,128	-0.44%
_	Commercial		
2.	Automobile Physical Damage Private Passenger	\$190,120	-0.54%
	Commercial	\$190,120	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does	filing only apply to certain territory (te	rritories) or certain classes? If	so specify:
		intories, or contain oldsbes. If	
	THE STOR CALL		
Add decr	description of filing. (If filing follows ing higher limits for property damage easing charge for vehicles over \$20,0 re Parts Coverage rules to match cov	ge and towing & labor, reducing the latest section of the latest s	ng category 9 & 10 rates,
	djusted to reflect all prior rate changes hange in Company's premium level wh		of many rates
** C	nange in Company's premium level wh	nen will result from application	of new rates.
			ern Insurance Company
		Name	of Company
		Janel Myers	, Research Analyst
11202			cial - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective: July 25, 2007

	(1)		(2) Annual Premium	(3) Percent	
	Coverag	е	Volume (Illinois)*	Change (+ or -)**	
1.	Automobile Liability Private Passenger	Motorcycle Liability	[Qtr206-Qtr107 on-level] \$1,315,330	-5.0%	
2.	Commercial Automobile Physical Damage Private Passenger	Motorcycle Phys. Damage	[Qtr206-Qtr107 on-level] \$1,438,598	+2.0%	
	Commercial		· •		

- 3. Liability Other Than Auto
- 4. Burglary and Theft
- 5. Glass
- 6. Fidelity
- 7. Surety
- 8. Boiler and Machinery
- 9. Fire
- 10. Extended Coverage
- 11. Inland Marine
- 12. Homeowners
- 13. Commercial Multi-Peril
- 14. Crop Hail
- 15. Other

Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adjusted base rates.

Dairyland Insurance Company

Name of Company

Brandon Basken - Actuarial Analyst I

Official - Title

^{*} Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE

Summary Sheet (Form RF-3)-IL Metro Symbol Program

Change in Company's premium or rate level produced by rate revision Effective: New Business 05/01/2007 and Renewal 06/01/2007.

	(1)	(2)	(3)
		Annual Premium	Percent
	<u>Coverage</u>	Volume (000's) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	<u>\$18,977</u>	
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$6,873	-4.39%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety	THEOLON OF IN	SURANCE
8.	Boiler and Machinery	DIVISION OF IN	OIS/IDFPH
9.	Fire	RECE	
10.	Extended Coverage	MAY 1	2007
11.	Inland Marine	IIIAI Z	200
12.	. Homeowners		······································
13.	. Commercial Multi-Peril	SPRINGFIELD),TELINOIS
14	. Crop Hail		
15	. Othe <u>r</u>		

Life of Insurance

Does filing only apply to certain territory (territories) or certain

Classes? If so, specify:

No, All Classes and Territories in the Metro Chicagoland

Area will be affected

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

Accepting ISO Symbols 20 and 21 for Physical Damage and introducing a 10 % Full Coverage Discount. Restructured the Liability rating methodology. Made various adjustments to the territory, class, limit, deductible, and symbol relativities, and adjustments to the base rates for both Liability and Physical Damage.

**Change in Company's premium level which will result from application of new rates.

FOUNDERS INSURANCE COMPANY
Name of Company
David Mirza-Vice President
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

Summary Sheet (Form RF-3) -IL Metro Value Program

Change in Company's premium or rate level produced by rate revision Effective: New Business 05/01/2007 and Renewal 06/01/2007.

	(1)	(2)	(3)
		Annual Premium	Percent
	<u>Coverage</u>	Volume (000's) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger	\$9,582	
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$7,679	-8.42%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	DIVISIO	N-OF INSURANCE
7.	Surety	STATE	OF ILLINOIS/IDFPR
8.	Boiler and Machinery		CEIVED
9.	Fire	M	\Y 1 2007
10	. Extended Coverage		\Y <u>1 2007</u>
11.	. Inland Marine		
12	. Homeowners	SPRING	SFIELD, ILLINOIS
13	. Commercial Multi-Peril	**************************************	
14	. Crop Hail		
	. Other		
	Life of Incurence		

Life of Insurance

Does filing only apply to certain territory (territories) or certain

Classes? If so,

specify:

No, All Classes and Territories in the Metro Chicagoland Area will be affected

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

Introducing a 10% Full Coverage Discount. Restructured the Liability rating methodology. Made various adjustments to the territory, class, limit, deductible, and symbol relativities, and adjustments to the base rates for both Liability and Physical Damage.

**Change in Company's premium level which will result from application of new rates.

FOUNDERS INSURANCE	COMPANY
Name of Compa	iny
David Mirza-Vice President	
Official – Title	

	Change in Company's premium or revision effective:	ate level produced by rate 05/31/2007 NB & 0	07/23/2007 RNL	
	(1)	(2) Annual Premium	(3) Percent	
	Coverage	Volume (Illinois) *	Change (+ or -)	
1.	Automobile Liability Private Passenger	3,642,829	-7.9%	
	Commercial	5,042,023	1.070	
2.	Automobile Physical Damage Private Passenger	1,472,994	-8.6%	
_	Commercial			
	Liability Other Than Auto			
4.	Burglary and Theft			
	Glass Fidelity			
7.	Surety			
	Boiler and Machinery			
	Fire			
	Extended Coverage			
	Inland Marine			
	Homeowners		Dur	
	Commercial Multi-Peril		STION OF IT	
	Crop Hail		OF ILLINSURANCE	-
	Other		O SIDFPR	= /
	Line of Insurance		MAY 7 2007 SPRINGFIELD, ILLINOIS	
	es filing only apply to certain territory ((territories) or certain	SPD	
clas	sses? If so, specify:		L OF HINGFIELD !!	1
No			LED, ILLINOIS	
	of description of filing. (If filing follows	rates of an advisory	7	i
	anization, specify organization):			
	CO Casualty Company proposes an			
	lementing Inexperienced Operator Si			
	ling Rental Reimbursement Limit of 3	0/900		
Uni	anging Class Factors			
** (djusted to reflect all prior rate change Change in Company's premium level esult from application of new rates.			

GEICO Casualty Company
Name of Company

Ashlee Michell - Analyst, State Filings Official - Title

	Change in Company's premium or ra revision effective:	ite level produced by rate 05/31/2007 NB & 07	/23/2007 RNL	
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -)	
1.	Automobile Liability			
	Private Passenger	44,902,372	-5.4%	
_	Commercial			
2.	Automobile Physical Damage Private Passenger Commercial	36,941,720	-6.2%	
3.	Liability Other Than Auto			
4.	Burglary and Theft			
	Glass			
	Fidelity		·····	
	Surety			
	Boiler and Machinery		DIVISION STATE OF	
	Fire		STATE OF	OFINE
	Extended Coverage Inland Marine			ILLINOURAN
	Homeowners			POSIDEPROE
	Commercial Multi-Peril			"ED
	Crop Hail			7 20
	Other		500	` <007
	Line of Insurance		PHINGEID	
			THE LE). II
			SPRINGFIELD	LUNOIS /
	es filing only apply to certain territory (to	erritories) or certain		
	sses? If so, specify:			7
No				
	ef description of filing. (If filing follows anization, specify organization):	rates of an advisory		
	ICO General Insurance Company prop	oses an overall change of -5.7%		
	elementing Household Composite facto			
	anging Bodily Injury Increased Limits F			
Add	ding Rental Reimbursement Limit of 30	/900		
	-			
	djusted to reflect all prior rate changes			
	Change in Company's premium level w	nich will		
r	esult from application of new rates.			
			GEICO General Insurance Co	ompany
			Name of Company	

Ashlee Michell - Analyst, State Filings
Official - Title

Change in Company's premium revision effective:	or rate level produced by rate 05/31/2007 NB &	07/23/2007 RNL	
(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -)	
	- 		
Automobile Liability Private Passenger	18,910,379	-7.6%	
Commercial	15,075,075		
2. Automobile Physical Damage			
Private Passenger	11,331,402	-5.4%	
Commercial			
3. Liability Other Than Auto			
4. Burglary and Theft5. Glass		 	
6. Fidelity			
7. Surety			
8. Boiler and Machinery		DIVISION	
9. Fire	·	DIVISION OF INSU STATE OF ILLINOIS/I	
10. Extended Coverage		CEINOISI	RANCE
11. Inland Marine			DFPR -
12. Homeowners	<u> </u>	MAY.	-0
13. Commercial Multi-Peril			,
14. Crop Hail 15. Other			
Line of Insurance		SPRINGFIELD, ILLING	
Line of madrance		TELD, ILLING) o
			"8
Does filing only apply to certain territorial	ory (territories) or certain		7
classes? If so, specify:			
No			
Brief description of filing. (If filing foll	lows rates of an advisory		
organization, specify organization):	iows fates of all advisory		
GEICO Indemnity Company propose	s an overall change of -6.8%.		
Implementing Inexperienced Operator	or Surcharge		
Adding Rental Reimbursement Limit	of 30/900		
* Adjusted to reflect all prior rate cha			
** Change in Company's premium le			
result from application of new rates	S.		
		GEICO Indemnity Company	
		Name of Company	
		Ashlee Michell - Analyst, State Filin	gs
		Official - Title	

	Change in Company's premium or i revision effective:	23/2007 RNL	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+ or -)
1.	Automobile Liability Private Passenger Commercial	15,013,373	-5.4%
2.	Automobile Physical Damage Private Passenger Commercial	13,357,910	-6.2%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5. 6.	Glass Fidelity		
7.	-		IVISION OF INCL.
8.	Boiler and Machinery		STATE OF INSURANCE
9.	·		E C LINOIS/IDENICE
10.	Extended Coverage		VED
	Inland Marine		MAY
12.	Homeowners		7 2007
13.	Commercial Multi-Peril		
14.	Crop Hail	T SPA	BINGE
15.	Other		MATTELD, ILLING
	Line of Insurance		RINGFIELD, ILLINOIS
	es filing only apply to certain territory of sees? If so, specify:	(territories) or certain	
org	ef description of filing. (If filing follows anization, specify organization): vernment Employees Insurance Com	•	£ 5 70/
	lementing Household Composite fact		1-5.176.
	anging Bodily Injury Increased Limits		
Add	ling Rental Reimbursement Limit of 3	0/900	

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Government Employees Insurance Company Name of Company

Ashlee Michell - Analyst, State Filings Official - Title

Change in Company's premium or rate level produced by rate revision effective $\frac{5}{1}$ 2007 (NB) $\frac{6}{30}$ 2007 (REN) .

(1)	(2)	(3)
	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability		
Private Passenger	115,807	-9%
Commercial		
2. Automobile Physical Damage		
Private Passenger	43,109	-5%
Commercial	13,107	
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		_
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	•	
15. Other		-
Line of Insurance		
Does filing only apply to certain	territory (territories	s)or certain classes?
If so, specify: No	• .	
Brief description of filing. (If	filing follows rates of	of an advisory
organization, specify organizatio	n): We will be adjust:	ing territory alignment.
	territory factors	DIVISION OF INSURANCE
	discounts.	STATE OF ILLINOIS/IDEPER
		RECEIVED
		DE WED
		APD 9 7 com
· · · · · · · · · · · · · · · · · · ·		APR 2 7 2007
* Adjusted to reflect all prior	rata abanga	
** Change in Company's premium le	rate changes.	SDDMOT
	ver which with	SPRINGFIELD, ILLINOIS
result from application of new	rates.	
	Interes Notional Inc	
	Integon National Inc	
	Name of Co	шћапА
	Timothy Hyman - F	Product Manager
	Official -	
H29219D	OTTICIAL -	11016
H29219D		

MAY 2 5 2007

Form (RF-3)

SUMMARY SHEET

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate revision effective 5-24-07

	(1) .	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.		4,862,000	-6.85%
3. 4. 5.	Liability Other Than Auto Burglary and Theft		
5. 6.	Glass Fidelity		
7.	Surety		
8. 9.	Boiler and Machinery Fire		
	Extended Coverage		
īī.	Inland Marine		
12.	Homeowners		*
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
15.	Cther		
	Line of Insurance		
Does If so	filing only apply to certain to o, specify: <u>RATE CHANGES</u>	erritory (territories) or ce	ertain classes? . N ALL TERRITORIE
AND	CLASSES EXCEPT FEME	THE UNDER 21 AND M	ALE UNDER 23.
Brief	description of filing. (If fi	ling follows rates of an ad	visory

organization, specify organization): LIPORTED TERRITORY LISTING, LADATED

*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates.

CAR MODEL SURCHARGE LIST, AMENDED

AND AMENDED FACTORS FOR 250 AND

NATIONAL HERITHEE INS. Co, Name of Company

DISCOUNT PAGE

DEDUCTIBLES.

KENNETH J. LISS

1000

VICE PRESIDENT

SUBCHAPTER 1

Section 754 - EXHIBIT A - Summary Sheet (Form RF-3)

FORM (RF-3) SUMMARY SHEET

		Company's							revision
effecti	ve	_April 287	-2007 (New	Busi	ness 🞉	Renewals)	 _	

	May 24, 2007	(2)	(3)
	(1)	(2) Annual Premium	• •
	G		Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger	7,955,495	10.3%
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	4,840,839	35.0%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	Does filing only apply to cer classes? If so, specify: <u>No</u>		tories) or certain

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _We have re-evaluated our rates and are___proposing changes to the base rates and usage factors for extra vehicles.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

21st Century Insurance Co Name of Company

Becky Murry, Regulatory Compliance Supervisor Official - Title

Change in Company's premium effective: Rene	wal <u>6-30-2007</u>	ate revision
New_	Business 5-5-2007 (2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
Automobile Liability		
Private Passenger	2,091,886	8.0%
Commercial		
Automobile Physical Damage		4 = 0/
Private Passenger	1,167,327	4.7%
Commercial		
3. Liability Other Than Auto (Motorcycle)		
4. Burglary and Theft		
5. Glass		· · ·
6. Fidelity		
7. Surety		
8. Boiler and Machinery		<u></u>
9. Fire		
10. Extended Coverage 11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other (Line of Insurance)		
(Line of insurance)		
Does filing only apply to certain territory (territories	s) or certain classes? If so,	specify:
District the solution of fillings (If fillings follows and a sol		
Brief description of filing. (If filing follows rates of Revising base rates, Driver Class, Liability-Only, L	Inderwriting tier, Territory, I	Limits, Deductibles,
Violation Surcharge/Time-Since, Accident Surcha	rge/Time-Since and adding	additional zip code.
* Adjusted to reflect all prior rate changes. **Change in Company's premium level which will	result from application of ne	ew rates.

Victoria Select Insurance Company
Name of Company

Lisa R. Livengood, State Filings Specialist
Official - Title